



Phoenix Therapy Practice

Adult, Child, Couples and Group Psychotherapy, Counselling and Psychological Services.

Child Protection Policy

Policy Statement

Phoenix Therapy Practice is committed to the principle of ensuring the safety and protection of all children and young people under the age of 18 and to work continuously in keeping them free from harm. Our aim is to maintain an environment in which children, young people and those with responsibility for their well-being, feel secure in accessing and using our services, and confident that their concerns will be treated with respect, consideration and due value at all times.

We aim to ensure that all members of Phoenix are aware of our commitment to child protection principles and that issues of child safety, whether physical or psychological, override other ethical or professional concerns according to the relevant professional guidelines (e.g. BACP Ethical Framework for Good Practice in Counselling and Psychotherapy: Providing a good standard of care, clauses 14 & 16) and the statutory requirements of the law.

Phoenix Therapy Practice will promote the principle of child protection in all areas of daily activity with particular attention to:

1. Staff and practitioner recruitment and training
2. Continuing in-house consultation and monitoring
3. Liaison with other agencies where ethically and/or legally indicated

Procedure

Practitioners

1. Where emotional, physical or sexual abuse or neglect of a child or young person is suspected or disclosed, the normal rule of client confidentiality cannot be observed and we have a duty to report this to the appropriate authorities (see Appendix 1 for statutory definitions of child abuse).
2. The following procedure should be read in conjunction with the Policy and Procedure for Confidentiality and the Procedure for Clinical and Ethical Dilemmas and observed by all practitioners:
If your client leads you to suspect that they know of a child who is at risk, either through their own actions or those of another:
 - Consider whether it is appropriate to advise your client of your concerns before discussing the matter with your supervisor and the Director
 - If your client makes a clear disclosure, consider whether immediate action must be taken. If so, advise your client of your concerns and inform them that this is a matter you are obliged to discuss with the Director.
 - Encourage your client to contact the relevant agency (see Appendix 2) and let them know that we have a legal obligation to pass on concerns.
 - Write an account of what you have been told and record any observations
 - Contact your supervisor and the Director without delay. If immediate contact cannot be made, follow the guidelines in the Phoenix Therapy Practice Procedure of Clinical and Ethical Dilemmas
 - Do not discuss the matter with anyone other than the persons to whom you are reporting.



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3. If a child or young person wants to talk about abuse:
 - Let them know that you need to tell someone else
 - Let them know what you are going to do next and that you will let them know what happens
 - Reassure them that they were right to tell you and that you accept what they Say!
 - Write an account of what they have told you and record any observations
 - Contact your supervisor and the Director without delay. If immediate contact cannot be made, follow the guidelines in the Phoenix Procedure of Clinical and Ethical Dilemmas
 - Do not discuss the matter with anyone other than the persons to whom you are reporting.

Supervisors and Director

4. The supervisor and Director (or other designated persons in their absence) are to discuss the reported matter and come to a decision on the validity of the practitioner's concerns and any action to be taken, bearing in mind professional guidelines, the statutory requirements of the law and the client's right to confidentiality.
5. In making a decision, consideration is to be given to what might happen if the information is reported, and to seeking clarification from the Duty & Assessment Team (see Appendix 2) or other statutory agencies on an anonymous basis.
6. If it is decided that there are reasonable grounds for suspecting child abuse:
 - The practitioner is to be informed of the action to be taken
 - Wherever possible the client is to be informed of the action to be taken – by whom and by what means to be jointly decided with the practitioner
 - The Director or appointed representative is to inform the Duty & Assessment Team, or, if the risk is considered to be immediate, the police (see Appendix 2)
7. Historical abuse of an adult aged 18 years or over or a case involving historical abuse of a person currently aged 18 years or over who now wishes to make formal charges is a police matter. There is no legal requirement to report such matters.



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Appendix 1

Categories of Child Abuse

The definitions of child abuse by the Department of Health, DfEE, the Home Office and Welsh Office (1991) are as follows:

Physical abuse

Actual or likely physical injury to a child, or failure to prevent physical injury (or suffering) to a child, including deliberate poisoning, suffocation and Munchausen's Syndrome by Proxy.

Sexual abuse

Actual or likely sexual exploitation by a child or young person, including forcing or enticing them to take part in sexual activities, whether or not they are aware of what is happening. Activities may include those which involve physical contact and those which do not, such as involving children in looking at, or in the production of, pornographic material, or watching sexual activities, or encouraging children to behave in sexually inappropriate ways.

Emotional abuse

The persistent emotional ill-treatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. All abuse involves some emotional ill-treatment — this category is used where it is the main or sole form of abuse.

Neglect

The persistent or severe neglect of a child or the failure to protect a child from exposure to any kind of danger, including cold or starvation, or failure to carry out important aspects of care, resulting in the significant impairment of a child's health or development, including non-organic failure to thrive.

Appendix 2

Multi Agency Safeguarding Hub **01273 290400**

This is number to call if a practitioner has any concerns about 'safeguarding' (ie common parlance for 'child protection').

The 'out of hours' (emergency duty service) number is **01273 335905**

Note:

As a Practitioner, be aware that you may be asked for the details about a case, and specifically they will ask you for the names and dates of birth of the children - so by the point of giving dates of birth you are likely to have discussed the confidentiality issue with the adult concerned first.

Lavender Street Office **01273 295400**

Social workers and disabilities team can be contacted here.

Pavilions Substance misuse service **01273 731900**

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Appendix 3

Policies and procedures to be read in conjunction with this procedure

1. Policy and Procedure on Confidentiality
2. Clinical and Ethical Dilemmas Procedure